



## **Supplemental Application Data Sheet**

### **Application Information**

|                                  |                                 |
|----------------------------------|---------------------------------|
| Application number::             | 10/777926                       |
| Filing Date::                    | 02/11/04                        |
| Application Type::               | Regular                         |
| Subject Matter::                 | Utility                         |
| Suggested Group Art Unit::       | 1615                            |
| CD-ROM or CD-R?::                | None                            |
| Sequence submission?::           | None                            |
| Computer Readable Form (CRF)?::  | No                              |
| Title::                          | METHOD FOR TREATING AMYLOIDOSIS |
| Attorney Docket Number::         | NCI-003CN5                      |
| Request for Early Publication?:: | No                              |
| Request for Non-Publication?::   | No                              |
| Small Entity?::                  | No                              |
| Petition included?::             | No                              |
| Secrecy Order in Parent Appl.?:: | No                              |

### **Applicant Information**

|   |                 |
|---|-----------------|
| Applicant Authority Type::              | Inventor        |
| Primary Citizenship Country::           | Canada          |
| Status::                                | Full Capacity   |
| Given Name::                            | Robert          |
| Family Name::                           | KISILEVSKY      |
| City of Residence::                     | Kingston        |
| Country of Residence::                  | Canada          |
| Street of mailing address::             | 120 Cairn Grove |
| City of mailing address::               | Kingston        |
| State or Province of mailing address::  | ON              |
| Country of mailing address::            | Canada          |
| Postal or Zip Code of mailing address:: | K7M 4B9         |

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Walter  
Middle Name:: A.  
Family Name:: SZAREK  
City of Residence:: Kingston  
Country of Residence:: Canada  
Street of mailing address:: 165 Ontario Street  
Suite 301  
City of mailing address:: Kingston  
State or Province of mailing address:: ON  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: K7L 2Y6

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Donald  
Middle Name:: F.  
Family Name:: WEAVER  
City of Residence:: Kingston  
Country of Residence:: Canada  
Street of mailing address:: 11 Falcon Place  
City of mailing address:: Halifax  
State or Province of mailing address:: NS  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: B3M 3R4

### **Correspondence Information**

Correspondence Customer Number:: 00959

**Representative Information**

Representative Customer Number:: 00959

**Domestic Priority Information**

| Application::           | Continuity Type::              | Parent Application:: | Parent Filing Date:: |
|-------------------------|--------------------------------|----------------------|----------------------|
| This Application        | Continuation of                | 10/125063            | 04/18/02             |
| 10/125063               | Continuation of                | 09/780233            | 02/09/01             |
| 09/780233               | Continuation of                | 09/322577            | 05/27/99             |
| 09/322577               | Continuation of                | 08/463548            | 06/05/95             |
| This Application        | Continuation-in-part of        | 08/542997            | 10/13/95             |
| 08/542997               | Continuation-in-part of        | 08/463548            | 06/05/95             |
| 08/463548               | Continuation-in-part of        | 08/403230            | 03/15/95             |
| <u>This Application</u> | <u>Continuation-in-part of</u> | <u>08/472692</u>     | <u>06/06/95</u>      |

**Assignee Information**

Assignee name:: Queen's University at Kingston  
Street of mailing address::  
City of mailing address:: Kingston  
State or Province of mailing address:: ON  
Country of mailing address:: Canada  
Postal or Zip Code of mailing address:: K7L 3N6